FORM D

UNITED STATES FECTIVED
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

% @ 2002

PROCESSED

JUN 0 7,2002 THOMSON P NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL

OMB Number: 3235-0076

Expires: May 31, 2002

Estimated average burden

hours per response 16.00

SEC USE ONLY					
Prefix	Serial				
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DATE RE	CEIVED				
1	1				

Name of Offering (check if this is an amendment and name has changed, and indica	ate change.)
Hilton Hotels Corporation - Common Stock 5/02	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506	Section 4(6) ULOE
Type of Filing: ☐ Amendment	
A. BASIC IDENTIFICATION I	DATA
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate	change.) 02037697
Hilton Hotels Corporation	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
9336 Civic Center Drive, Beverly Hills, CA 90210	(310) 278-4321
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices) Same	Same
Brief Description of Business Own, manage and develop hotels, resorts and times	hare properties
Type of Business Organization	
□ corporation □ limited partnership, already formed	other (please specify):
☐ business trust ☐ limited partnership, to be formed	
Month Year	
Actual or Estimated Date of Incorporation or Organization: 0 5 4 6	
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbre	eviation for State:
CN for Canada; FN for other foreign juri	
	<i>B B</i>

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA	
 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% of the issuer; 	'
 Each executive officer and director of corporate issuers and of corporate general and managing partner Each general and managing partner of partnership issuers. 	ers or parmership issuers, and
• Each general and managing partner of partnership issuers. Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Bollenbach, Stephen F.	
Business or Residence Address (Number and Street, City, State, Zip Code) 9336 Civic Center Drive, Beverly Hills, CA 90210	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Crown, A. Steven	
Business or Residence Address (Number and Street, City, State, Zip Code) 9336 Civic Center Drive, Beverly Hills, CA 90210	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	r
Full Name (Last name first, if individual) George, Peter M.	
Business or Residence Address (Number and Street, City, State, Zip Code) 9336 Civic Center Drive, Beverly Hills, CA 90210	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer ☐ Directo	r
Full Name (Last name first, if individual) Hart, Matthew J.	
Business or Residence Address (Number and Street, City, State, Zip Code) 9336 Civic Center Drive, Beverly Hills, CA 90210	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	or
Full Name (Last name first, if individual) Hilton, Barron	
Business or Residence Address (Number and Street, City, State, Zip Code) 9336 Civic Center Drive, Beverly Hills, CA 90210	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director	or General and/or Managing Partner
Full Name (Last name first, if individual) Huckestein, Dieter	
Business or Residence Address (Number and Street, City, State, Zip Code) 9336 Civic Center Drive, Beverly Hills, CA 90210	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director	or General and/or Managing Partner
Full Name (Last name first, if individual) Johnson, Robert L.	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter ☐ Beneficial Owner □ Director General and/or Managing Partner Full Name (Last name first, if individual) La Forgia, Robert M. Business or Residence Address (Number and Street, City, State, Zip Code) 9336 Civic Center Drive, Beverly Hills, CA 90210 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Lambert, Benjamin V. Business or Residence Address (Number and Street, City, State, Zip Code) 9336 Civic Center Drive, Beverly Hills, CA 90210 Check Box(es) that Apply: Promoter ☐ Executive Officer General and/or ☐ Beneficial Owner □ Director Managing Partner Full Name (Last name first, if individual) Michels, David Business or Residence Address (Number and Street, City, State, Zip Code) 9336 Civic Center Drive, Beverly Hills, CA 90210 General and/or Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer □ Director Managing Partner Full Name (Last name first, if individual) Myers, John H. Business or Residence Address (Number and Street, City, State, Zip Code) 9336 Civic Center Drive, Beverly Hills, CA 90210 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Notter, John L. Business or Residence Address (Number and Street, City, State, Zip Code) 9336 Civic Center Drive, Beverly Hills, CA 90210 Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Shelton, Judy L. Business or Residence Address (Number and Street, City, State, Zip Code) 9336 Civic Center Drive, Beverly Hills, CA 90210 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Tuttle, Donna F. Business or Residence Address (Number and Street, City, State, Zip Code) 9336 Civic Center Drive, Beverly Hills, CA 90210 (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

A BASICIDE	NTIFICATION DATA		
Enter the information requested for the following:		<u> </u>	
• Each promoter of the issuer, if the issuer has been organized	within the past five years;		
 Each beneficial owner having the power to vote or dispose, o 	r direct the vote or disposi	tion of, 10% or	more of a class of equity securities
of the issuer:	and the vote of dispress	,	
 Each executive officer and director of corporate issuers and o 	f corporate general and m	anaging partners	s of partnership issuers; and
 Each general and managing partner of partnership issuers. 			
		5 D'	General and/or
Check Box(es) that Apply: Promoter Beneficial Owner	☐ Executive Officer	□ Director	_
			Managing Partner
Full Name (Last name first, if individual)			
Jeberroth, Peter V.			
Business or Residence Address (Number and Street, City, State, Zip	Code)		
336 Civic Center Drive, Beverly Hills, CA 90210			
The state of the s			Cararal and/ar
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	☐ Director	General and/or
			Managing Partner
Full Name (Last name first; if individual)			
Young, Jr., Sam D.			
Business or Residence Address (Number and Street, City, State, Zip	(Code)		
9336 Civic Center Drive, Beverly Hills, CA 90210			
Check Box(es) that Apply: Promoter Beneficial Owner		Director	General and/or
•			Managing Partner
Full Name (Last name first, if individual)			
Keltner, Thomas L.			
Business or Residence Address (Number and Street, City, State, Zip	Code)		
	(Code)		
9336 Civic Center Drive, Beverly Hills, CA 90210	and the second s	21 7 2000-y 25 612813.4	— was as a war was a second
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	General and/or
		PETERS (1964)	Managing Partner
Full Name (Last name first, if individual)			
Kleiner, Madeleine A.			
Business or Residence Address. (Number and Street, City, State, Zi	n Code)		
			The state of the s
9336 Civic Center Drive, Beverly Hills, CA 90210			
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner		☐ Director	General and/or
			Managing Partner
Full Name (Last name first, if individual)			
Southeastern Asset Management, Inc.			
	n Code)		
Business or Residence Address (Number and Street, City, State, Zi	p code)		
6410 Poplar Avenue, Suite 900, Memphis, TN 38119		and the second of the second	
Check Box(es) that Apply: Promoter Beneficial Owner	Executive Officer	Director	☐ General and/or
			Managing Partner
Full Name (Last name first, if individual)			
	- Co.J.)	PERSONAL CONTRACTOR	
Business or Residence Address (Number and Street, City, State, Zi	p code)		er en
Check Box(es) that Apply: Promoter Beneficial Owner	☐ Executive Officer	Director	☐ General and/or
			Managing Partner
Full Name (Last name first, if individual)			
D 11 411 OI 1 100 Cit Cit Cit 7	in Code)		
Business or Residence Address (Number and Street, City, State, Z	ip code)		
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1.54.1. Table			andawii adam Absar Awkin	B. I	NFORMAT	TION ABO	UT OFFE	RING		The state of the s	medica	and the second of the second o
										-	Yes	No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									\boxtimes			
2 What is	e tha minim	um invectm	Answ ent that will								¢02.5	12 000 00
2. What is	s the minim	um mvesm	ent that wil	oc accepit	od from any	marviduai:					<u> \$00,0</u>	12,000.00
											Yes	No
3. Does th	ne offering p	oermit joint	ownership	of a single	unit?					•••••		\boxtimes
1 Enter t	ha informa	tion reques	ted for eacl	nercon u	ho has bee	n or will b	e noid or	aivan dira	ethy or indi	ractly any		
commi	ssion or sim	ilar remune	ration for se	olicitation o	of purchaser	s in connec	tion with sa	les of secur	ities in the	offering. If		
			ciated person									
			oker or deal forth the inf					are associa	ated person	s of such a		
	(Last name											
Not Appli	cable											
Business o	r Residence	Address ()	Number and	Street Cit	v State Zir	Code)						
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77 01										 		
Name of A	Associated E	Broker or De	ealer									
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`			lividual Stat	,			(DE)	ייייייייייייייייייייייייייייייייייייייי		rc 4.1		All States
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Full Name	(Last name	first, if ind	ividual)									
	(======================================		,									
Pusiness o	r Paridonae	Address	Number and	Street City	v State Zin	Coda						
Dusiness 0	i Residence	Address (1	vuiliber and	Sileet, Cit	y, State, Zip	(Code)						
												
Name of A	ssociated E	Broker or De	ealer									
			s Solicited									
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Full Name	(Last name	first, if ind	ividual)									
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Rusiness	r Pesidence	Address (N	Number and	Street City	y State Zin	Code				 		
Dusiness 0	n Kesidence	: Address (1	Nullibel allu	Sireci, Cit	y, State, Zip	(Code)						
Name of A	Associated E	Broker or De	ealer									
States in V	Vhich Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers		.				
			lividual Stat	-								All States
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[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND U	SE OF PROCEEDS	Hij allingave i
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$0.00	<u>\$0.00</u>
	Equity	\$83,512,000.00	\$83,512,000.00
	Convertible Securities (including warrants)	\$0.00	\$0.00
	Partnership Interests	\$0.00	<u>\$0.00</u>
	Other (Specify)	\$0.00	<u>\$0.00</u>
	Total	\$83,512,000.00	\$83,512,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	<u>1</u>	\$83,512,000.00
	Non-accredited Investors	<u>o</u>	- \$0.00
	Total (for filings under Rule 504 only)		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	T	D. Hardana
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		
	Regulation A		
	Rule 504		
4.	Total		
	Transfer Agent's Fees		<u>\$0.00</u>
	Printing and Engraving Costs		\$25,000.00
	Legal Fees	 	\$50,000.00
	Accounting Fees		\$10,000.00
	Engineering Fees		\$0.00
	Sales Commissions (specify finders' fees separately)		\$0.00
	Other Expenses (identify) registration fees; real estate transfer fees; miscellaneous		\$62,700.00
	Total		\$147,700.00

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3	C. OFFERING PRICE	, number of inv	ESTORS, EXPENSES A	ND U	SE OF P	ROCEEDS	A gain to t	
	b. Enter the difference between the aggregate of and total expenses furnished in response to Part C proceeds to the issuer."	- Question 4.a. This	difference is the "adjusted	gros			\$83,364	,300.00
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.							
	Total in Toponio to Yak o Quosion no acoto				Óff Direc	nents to ficers, tors, & liates	,	ents to hers
	Salaries and fees				\$0.00		\$0.00	
	Purchase of real estate				\$0.00		\$0.00	
	Purchase, rental or leasing and installation of r	nachinery and equipr	ment		\$0.00		\$0.00	
	Construction or leasing of plant buildings and	facilities			\$0.00		\$0.00	
	Acquisition of other business (including the va offering that may be used in exchange for the	assets or securities of	another					
	issuer pursuant to a merger)				\$0.00		\$0.00	
	Repayment of indebtedness				\$0.00		\$0.00	
	Working capital	•••••			\$0.00		\$0.00	
	Other (specify): Acqusition by affiliated entit	y of a general partne	ership interest_					
	in Pan Global Resorts, a Hawaii limited part	nership. There were	e no cash					
	proceeds.						<u>\$83,364</u>	,300.00
	Column Totals				\$0.00	\boxtimes	\$83,364	,300.00
	Total Payments Listed (column totals added).				\boxtimes	\$83,364,300	0.00	-
		D. FEDERAL S	SIGNATURE		MITTER THE STATE OF THE STATE O			
sig	e issuer has duly caused this notice to be signed by nature constitutes an undertaking by the issuer to formation furnished by the issuer to any non-accredi	urnish to the U.S. Se	curities and Exchange Com	miss				
SS	uer (Print or Type)	Signature	1/1		Da	ate		-
Hil	ton Hotels Corporation	Com	1110			5/14/02		
Va	me of Signer (Print or Type)	Title of Signer (Prin	t or Type)					_
Br	yan S. White	Vice President, Senior Counsel and Assistant Secretary						